

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **FACILITATED BALLOON CATHETER EXCHANGE** the specification of which is attached hereto.

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
60/528,263	December 8, 2003


POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

James Heslin, Reg. No. 29,541

Send Correspondence to: James M. Heslin, Esq. TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, California 94111-3834	Direct Telephone Calls to: Name: James M. Heslin Reg. No.: 29,541 Telephone: 650-326-2400
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Full Name of Inventor 1:	Last Name: KONSTANTINO	First Name: EITAN	Middle Name or Initial:
Residence & Citizenship:	City: Orinda	State/Foreign Country: California	Country of Citizenship: Israel
Post Office Address:	Post Office Address: 29 Meadow Court	City: Orinda	State/Country: California
			Postal Code: 94563

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1  EITAN KONSTANTINO
Date 2/9/04